







# MEDICAL REFORM:

BEING THE SKETCH OF A

Plan for a National

INSTITUTE OF MEDICINE.

BY AZYGOS.

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## INTRODUCTION.

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It is a trite remark, although not more trite than true, that on the empire of England the sun never sets. The colonics of our country enjoy every variety of soil, climate, and natural production. The commerce of England is nearly ubiquitous; the political influence and power of England, if not absolutely paramount, are, at least, not second to those of any other state. The social economics of our country are far in the van of human progress. In religion, in arms, in manufactures, and in general science, we may proudly claim the pre-eminence. A people so great should have noble institutions. In order to ascertain how far this is the case, let us then take a cursory view of the great separate interests of the nation. We find the divine admitted to the highest station subordinate to the throne; the successful lawyer attaining an eminence but little inferior to the divine; the victorious general or admiral scarcely

third in public estimation, and in the possession of all the honours and rewards a grateful nation can confer. There is still, however, one of the liberal professions, which, amidst the general success of others, remains degraded, neglected, and comparatively stationary, and that is the profession of Medicine. Were the public interests involved in the cultivation of this profession trivial, or comparatively less important than other interests, there would be no reasonable grounds for surprise at its present low estate, and disregarded claims : but how great will be the astonishment of the future generations of our countrymen, when they learn that, even in this advanced and enlightened age, whilst the most dignified stations, together with the greatest power and wealth, rewarded the successful in so many other pursuits, this, the second interest in the State, was left thus abandoned and degraded ! We repeat it, the *second* interest, as we advisedly and willingly concede the first rank in importance to that profession, which has for its objects a nation's spiritual interests, a people's eternal welfare ; but next, most assuredly, in the individual and collective well-being of the community is the general health.

Let us take a preliminary and cursory review of the profession of Physic, as it now stands, and as it is presented to our minds in its Political, Scientific, and Social aspects.

The Political status of the Profession is at present



altogether anomalous. It is seen rather as a number of detached petty republics, without any confederacy, the only apparent bond of union betwixt them being one common subject of scientific pursuit. This state has arisen from a number of distinct charters, granted by different sovereigns, or different governments, at various times, with various objects and powers; thus there are the various medical corporate bodies of London, others of Edinburgh, others of Dublin, of Glasgow, of Oxford, of Cambridge, of St. Andrew's, of Aberdeen, &c.; numerically, they probably amount to about thirty. The corporate bodies who act upon these chartered prescriptions, have objects and aims as various as the privileges they enjoy or exercise, and the *esprit du corps* of each, naturally perhaps, manifests itself in efforts to aggrandize its own special powers and influence; some of these have merely an educational character, others relate to the restriction of practice within certain limits of the realm; others, again, profess to protect their members, in the exclusive legal possession of one branch of practice, &c. To recite and to analyze at length the respective functions of these different corporations, would be leading us too widely from our object, and over ground which has of late years been trodden so often, that to most of our readers it would be tiresome, and all the salient points of our subject would thus become obscured by the elaboration of needless proof. We shall, therefore, presume that,

the mere fact of the existence of corporations so discrepant in power and so conflicting in interests will be alone amply sufficient for the conviction of most minds, that with such jarring elements nothing less than confusion and disunion must ensue. In our opinion, however, it is not from the positive effects of these divided and clashing interests that the baneful influence to the whole medical body has chiefly arisen, although these direct results are themselves fraught with mischief enough. For instance there is no title or denomination of any one class which is in the least significant of either duration of studies, amount of acquirements, or possession of skill, and hence we have Physicians who have passed a scholastic examination, who have passed a professional examination, who have passed no examination, and Surgeons who have passed a surgical examination, who have passed a mixed examination, who have passed none. And yet to the public, who are mostly ignorant of these things, any professed Physician is a consulting medical practitioner, whatever his acquirements may really be, and any professed Surgeon is in like manner a practitioner irrespective of his claims, legitimate or otherwise, to public confidence. All are erroneously considered alike, but between the practitioners themselves of such varied titles or pretensions, it will be readily understood what an amount of jealousy, disunion, and antagonism must be induced. Such are samples merely of the positive evils,

bad enough it will be acknowledged; and yet the negative and obstructive influence of this unhappy condition of our medical *crisis* is scarcely less so, for by the enduring operation of the existing chartered powers, the adoption of a wiser political arrangement is prevented. These not only generate confusion but necessarily tend to entail it; since, from such a chaos of conflicting elements, clashing principles, and interests so irreconcilably opposed to each other, a paltry trimming policy is all that can be expected under any conservative and consentient plan of reform, and therefore they are naturally limited to proposals for the emendation of things as they now exist, instead of meeting the difficulty fairly, in its full extent and magnitude. We shall not stop to consider with any particularity the different schemes of Medical Reform which have been proposed and promulgated, but merely remark on the contemplated measures, that, besides *not* including amongst their objects the permanent establishment of Medicine on a scientific basis, or its cultivation even on a limited scale, they also involve the absurdity we think, of requiring the concession of the powers, for the regulation of the complicated and multifarious interests, of a great Professional community, to a small body of men, who, however competent individually, and collectively, are all of them perpetually engaged in the private practice of their profession. But besides many special objections

which we might urge to each of them, they are all in our views fatally defective in their scope and object, inasmuch as they are mainly proposals for alterations in the present system of medical education, with here and there a few clauses, for securing the ethical deportment of medical members. All these schemes, however, have one common significance to our minds; they intimate the wide-spread feeling of the exigency which exists for some change, and that of a comprehensive character: and we are perfectly persuaded that this exigency can only be permanently met by the *entire* re-organization of the Profession throughout the three kingdoms. No doubt the most obvious method of procedure, towards this consummation, would be for all the Medical bodies corporate, having previously agreed upon some comprehensive plan, to resign and sacrifice their individual corporate powers and privileges, and then to co-operate in the new arrangement. And we cannot but think that there would be a unanimous agreement towards the desired renovation, if under the newer and better system, the present officials could see that their solid interests would be preserved,—for, in fact, they would be more than preserved, inasmuch as they would become vested in a system less liable to decay. But if, unfortunately, there should remain one selfish recusant body, which either could not, or would not, see its equivalent under a better regime, and had the hardihood to oppose the wishes of the rest of the

Profession, in selfish obstinacy, there would still remain to the harbingers of a better code, the ultimate resource of a royal mandate. We are aware that many would object to such attempts at obtaining the general consent of all parties, that years of unsuccessful efforts towards any desirable change might thus be wasted in vain. We think otherwise, and are moreover fully convinced, that the evils which would certainly arise from over-precipitancy in legislation, would far out balance the comparatively trifling ones of a little delay; for let it be considered that the problem is nothing less than the devising of the best plan for the regulation, through all future time, of the second interest in the realm. What we think is required at present is evidence, and an accumulation of facts and ideas; and since probably most practitioners, throughout the kingdom, have their own special points of view in the medical kaleidoscope, we think it desirable that the general opinions of the Profession should be taken, far rather than that a hasty concession of parliamentary power should be made to demands, which are narrow, imperfect, and certainly without that ardent sympathy and support of the general body, which so great a revolution ought, for the future stability of the Profession, to carry with it.

On a superficial attention to the Scientific aspects which the Healing Art presents, we shall perceive that the more strictly professional history of Medicine exhibits a perpetual succession of Dogmatisms: one

man of greater ingenuity than his contemporaries has arisen, and led the opinions and practice of his generation, with a longer or shorter rule over mens' minds, until his views having become somewhat "stale, flat, and unprofitable," another leader has appeared to divide his empire, or to subdue it. Thus we have successively been under the sway of fluidist, solidist, chemist, vitalist, &c., till having completed our cycle, we are daily becoming once more involved in the vortex of a humoral pathology.

Can it be a source of wonder, that such a system should have produced results so contradictory and so injurious to the character and stability of the Profession, that many of its most learned and able members have become disgusted with this endless vacillation, and have, in a paroxysm of indignation, boldly proclaimed themselves to the world medical infidels? It is obvious that such a condition of medical affairs, which has continued even to the present time, was not such as to claim, either from the public, or the Government of the day, much sympathy or support. To any appeal, the reply of those in power might be supposed consistently enough to have been, "Before we can assist you efficiently, which we are quite willing to do, you must first settle the principles of your science, and then define your wants." To such a supposed repulse from our rulers can we make any other reply, than the humiliating acknowledgment, that hitherto all has been trusted to a vague tradition;



that there has been no Temple where our science was carefully nurtured and enshrined, no public Altar for the offerings of her votaries, no consecrated Priesthood for her service; that, although we are able to teach Anatomy, Chemistry, and Botany (with their adjuncts), yet beyond these essential, yet still elementary, subjects we cannot go far, and for this reason, that the Science we profess is still undeveloped? Does any one demur to this confession? Then let us ask him, Will you teach the doctrines of the day, subject as they are to change and subversion before the year's end, or, at least, within a very limited period? Or are you indeed clearly convinced what are the doctrines of the day? Do not the Professors of one school contradict those of another? Is not your boasted possession of scientific knowledge called in question by every German charlatan, who is thus enabled to defy your authority, and triumphantly challenge the proof of your principles? To all these queries one answer may be given, which sufficiently demonstrates the first proposition, upon which we shall insist—that the establishment of your Science is paramount to all other objects. Nor is this proposition at all invalidated by the advanced state of Medical Art\*; labouring as

\* Science is taught; Art is communicated. Science requires lectures and books for her revelations; Art is directly transfused from the skilled to the unskilled. Science reasons; Art exemplifies, and dictates. Science is steady, certain, and progressive; Art is vacillating, doubtful, and limited.

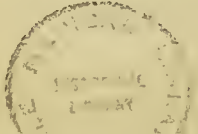
it does, under the want and absence of all synthetical principles, at least such as bear with them a sufficiently wide basis of proof, to secure our ready assent, and to give us confidence in their stability. It is well, that an ever watchful sagacity, called into daily exercise in professional attendance on the sick, with fair general knowledge, will in most cases make a medical man skilful, though not to the extent required; and it is the possession of this practical skill by so many of our Profession, that constitutes our present social value in the community. It is a source of regret, under our present imperfect system of procedure, in the furtherance of medical knowledge, that the exquisite skill of ingenious practitioners too frequently dies with them, and leaves their untransmitted acquisitions to be again discovered by others. Were this to be always the case, there could be no progress, but rather stagnation: and hence it is to be deplored as a serious misfortune, that the most skilful cannot always so accurately analyze their own minds, as to communicate the processes of thought and feeling, which led them to the adoption of particular modes of successful practice. Hence the necessity of recording and classifying all the circumstances attending these triumphs of our Art, that when scientifically arranged, they may constitute principles for future guidance, which shall embody and perpetuate this superior skill. But there is no more uncertainty in Medicine



than in Divinity, or even in Law; if we are at present satirized for the differences between our doctrinal views, we may truly reply to our adversaries, that these differences of different medical schools, no more prove that there is no foundation for Medicine as a Science, than the great variety of opinion amongst religious sects, as to articles of faith and forms of ritual, proves, that there is no truth in religion; or than the varied decisions of our courts of law prove jurisprudence a farce: yet these doctrines differing in different schools, are our most vulnerable part, especially in the hands of the ignorant and empirical. They are the result of crude and imperfect attempts at scientific generalization, and, like all such attempts, they are ever liable to be overthrown, in proportion to the narrowness of their foundation. Nature is uniform — as much so in the healthy and morbid actions of animal bodies, as in the rotation of the planets; and although there are vast difficulties, confounding intricacies, innumerable specialties, in Medicine, such as no other study presents, and such as are enough to drive a man to despair, who has only penetrated far enough into the subject first to perceive them, are we, therefore, in indolent reluctance and with a craven spirit, to turn from the work before us? No: we must and will put forth all our energies in mighty and continued effort, till we have overcome the vast difficulties we have to encounter;

nor will we cease till our arduous task is fully achieved, persuaded that there will result from its triumphant accomplishment, a development of the true principles of the Science, which will resemble a new and beautiful creation, full of order, light, and good, What we require to effect this great object, is Machinery, the mighty force of a high steam-pressure engine of intellectual combination, such as the world has not hitherto brought to bear upon the work, the only labourers having been few, and scattered, without concentration of aim, and but scantily provided with the proper implements, to effect the desired object. No mode, like that which is now prevalent, will ever give us sound general results in this our Medical department of nature. The induction is too narrow, the facts have no collective weight, no “form or pressure;” the observations are wretchedly superficial, the observers are not organized in a united consentient body. We require thinkers too—at present, we are all actors\*; we all bring our little knowledge and skill direct into the market, for ready money, which spoils every one, sooner or later, for public service. Yes, give us men of good mathematical

\* It may surprise some to learn what, nevertheless, we consider true, that Medical Art is obstructive to Medical Science, not essentially indeed, but from the ever open and ready market which the public necessities for relief under suffering constitutes, the abstract cultivation of Medicine becomes neglected; and this neglect is again fostered by the want of a purely scientific body. (Vide p. 11, line 1.)



or dialectic heads ; let us clothe and feed them, succour and honour them. They are sadly out of place in the world's struggle, and are sure to come off second best ; but placed in favourable circumstances, with leisure and opportunity for performing their appropriate work, we shall all reap the benefits of the peculiar talents they possess, and they will attain their due reward and just estimation. The splendid isolated discoveries which have at different periods been made under the present imperfect system, will not appear as objections to the innovating measures we advocate, if their number be calculated by time, or if they be contrasted with the immense amount of ill-directed labour which others have gone through in past years, and which, although based on more or fewer scattered truths, are yet so bound up with a false philosophy, that both truth and error sink together. There is, therefore, nothing for us but a close, servile waiting upon Nature, making every hospital an Observatory, and leisurely working out results.

In addition to the other evils caused by our disjointed Political constitution and by the unsettled state of our Science, there are Social ones, which, although mainly traceable to these two former principal defects as their causes, do, nevertheless, re-act secondarily, and become in their turn productive of much mischief. As things are now constituted, large practices are the only prizes in the Profession ; there

are no high offices of dignity, no honours, titles, distinctions, or rewards, conferred by an acknowledged intelligent, impartial, supreme, and dynastic Head; and it, therefore, cannot be surprising that these extensive practices should constitute the goal towards which the efforts of the aspiring and ambitious are naturally directed. If in Medicine, indeed, the race was to the swift, riches to men of understanding, and favour to men of skill, then would the acquisition of an exorbitant amount of popularity be the exponent of the possession of these meritorious endowments by the successful candidate; but a short retrospect into the past history of medical life, will soon convince any unbiassed judge that the contrary is the fact, and that the sole existing distinction which these extensive practices constitute, are ignorantly, unjustly, capriciously awarded, *arbitrio popularis aureæ*. There seems, indeed, a constant tendency on the part of the public to run into the extremes of adulation of men who are ostentatiously obtruded upon its attention; and this tendency is equally manifest in its extravagant applause of favourite singers, actors, artists, and doctors. A popular weakness of this kind is soon noticed by candidates for popular favour; and it, therefore, becomes their chief aim to secure the possession and use of the required leverage to push them forward. Whether this tendency on the part of the public is resolvable into one of the varieties of national hero-

worship, seeking some embodiment of the ideal and taking the first object that is well presented for the god of its idolatry; or whether it has its origin in mental indolence, which cannot be put to the fatigue of judging, and therefore decides on the slightest pretensions to merit, or none at all, is to us an inscrutable mystery. From whatever cause this insane propensity in the public to patronize some worshipped favourite arises, the manifestations of such an adulatory spirit are frequently no less absurd than disgusting.

From amongst many others whom the public delighted to honour, let us first take the late most renowned, most puissant St. John Long. This worthy gentleman was credibly supposed to have received twelve thousand pounds annually from the ignorant credulity of the nation; and, be it remembered, not from the low and illiterate, but from the higher classes of the community.

Our next instance shall be the type of a more legitimate medical hero—Dr. Bubble—who having duly paid his fee for his Foreign Diploma, and having duly received the mystical consignment by post, which thus conveniently supersedes the necessity of an examination, he then frequently becomes (but by no means uniformly) the *Genius loci* of some fashionable watering-place. From the number of his admiring votaries, this prodigy's vast discoveries in Medical Art might reasonably be supposed so astounding as

to command the honour alike "of men, gods, and columns," but when submitted to the test of cool deliberation, his prescriptions in other hands would really appear to short-sighted mortals like ourselves, absolute trumpery. His advice also seems to be stereotyped, such an exact weight of mutton, such an exact measure of sherry, and to a yard, such an exact allowance of ambulation. These are the splendid triumphs of scientific discovery, which every Dr. Bubble, bequeaths to future ages!

Is it not high time, we ask, that all this exquisite fooling should be stopped? If it be objected that such instances are isolated and extreme exceptions to the general career of medical life, we must unreservedly dissent from the conclusion. There is too often throughout the whole body, a fine and imperceptible gradation and shading from these types, down to the other extreme of the unostentatious, and too frequently neglected votary of science. Hence the general professional mind is rendered unsound, more being animated by a desire of attaining what is conventionally received, as "success in life," which simply implies the obtaining of a large income, than by the comparatively self-sacrificing, yet higher incentives, of public usefulness. This *auri sacra fames* teaches the many struggling competitors for fortune, that there is a viaticum which leads to this "low eminence," far different from the only legitimate path of duty and true desert, and



many circumstances conduce to render this wrong course the great highway of the Profession. Is it a question how Dr. Z., whom we all knew at our University, as a second or third-rate man, and certainly no hard reader, should have outstripped his fellows in practice? The answer is at hand, he came into this locality, influentially and powerfully introduced, he was pitched into our hospital by his patrons, and therefore became to the public attention a prominent man. Thus all kinds of sinister influence are sought after, and thus the independence of the Profession is sacrificed. But, say the apologists of such things (who generally consider the end as justifying the means), "this is simply prudence, and foresight;" *we* designate it the science of *world-craft*. But they add, "you cannot alter human nature." Nothing is much more disgusting to our minds, than this impudent stagnation plea, which is ever most frequently in the mouths of those who have profited most largely by the corrupt elements of our social state, "You cannot alter human nature!" Yes, we reply, we can. Human nature is always exercised variously, by the fortuitous or artificial circumstances, with which it is surrounded, be they good or bad, and both are cumulatively elevating or deteriorating. Then let us change these manifestations of human nature, by changing the incentives, which constitute the *irritamenta malorum* of medical life. We are convinced that another cause which greatly helps to foster the mercenary

spirit amongst us, is the frequent humble origin, and limited means of our young recruits, which cause not only operates prejudicially, by involving a narrow and imperfect general education of our members, but also (and which is more pertinent to our present remarks) by giving a false and fictitious estimate to all the trumpery accidents of wealth. These *res angustæ* naturally excite an eager lust and low ambition to surround the neophyte with the gauds which he finds act *ad captandum vulgus*; and therefore whether it be regarded as a means or an end, money becomes the chief object of his efforts. In this arduous competition with his fellows, who are often influenced by the same motives, he too soon finds that to obtain what is considered success in life, it is of much less consequence what he really knows, and can perform professionally, than what the public gives him credit for; and although, perhaps, in the innocent dreams of youthful ambition, he placed his whole confidence of future success on his own merit alone, he soon learns that the public opinion in any one's favour (however incompetent, professionally, he may know him to be) is fortune, station, and power. A little observation of those who pursue this flattering career will also show him that men of rather coarse mental fibre, evinced in a decent arrogance, or veiled assurance, with caution, and the tact of both making and laying hold of every "coigne of vantage," far more frequently attain success than all the real capabilities



for true professional eminence. Is it likely then that under such teaching the young practitioner, whose early ideal standard was proficiency of scientific achievement, should long continue faithful to his first love? No, Plutus will gradually supplant Minerva, and under his dominion will too quickly come the envy, hatred, and malice, of world-rivalry. But, it may be asked, are then all the eminently successful in medicine, either fools or knaves? We answer by no means, some are born to medical greatness, some acquire it, and on others an indulgent public thrusts it. We will therefore now take the instance of one, who was really a clever, deserving man, upon whom an excess of popularity has been heaped. He sees on an average, upwards of forty patients before noon; we have no means of ascertaining at what hour he rises in a morning, but it does not require a very early one for purposes of practice, since the invalids who constitute his subjects are not generally themselves very early risers; hypothecate then the hour, and whatever hour it be, consistent with sick attendance, let the intermediate time betwixt this hour and noon be divided by forty, and it will at once be seen what a trifling period is allotted to the due consideration of the special exigencies of each case. If the Doctor's sitting be supposed to commence at eight A.M., it will exactly give six minutes to the individual examination and prescription of every patient!! He therefore soon begins to copy him-

self, all originality or speciality of judgment being of course soon out of the question; he then takes refuge in a few simple formularies, which he knows at least are harmless. The patients, taking the amount of benefit derived from these formularies, as a true criterion of the collective good to be obtained from scientific practice, and an exponent of our general efficiency, begin to call in question the efficacy of Medical Art—hence a re-action to our common prejudice, and an impetus given to all sorts of empiricism. Weak-minded practitioners copy his nostrums and formularies, out of deference to such a high practical authority!! We do not, of course, hold such a man responsible for all these evils, he does not commit a fraud upon the public, the public cheats itself, foolishly acting upon the absurd belief, that a man can do what is utterly impossible; a career of this kind will generally terminate in making its subject sceptical, as to the value of Medical Art. His self-love will scarcely allow him to think that his practice has been useless, and therefore his ultimate conclusion will probably be, if such fid faddery as I have used so extensively, be all that is required to secure professional eminence, a fig for more solid attainments and higher aims. Many years' attention to all subjects, affecting the profession of Physic, has led us to the conclusion, that large practices, the only prizes which the Profession offers at present to its members, are in many ways its bane. By them the high

scientific tone of the Profession is depressed ; its independence sunk ; a low standard of effort is fostered ; the individual who succeeds is rendered worthless ; the public cheated ; false practice authorized ; quackery promoted ; and sterling merit often deprived of its just reward.

But we have hitherto confined our attention to the successful, whether meritoriously or otherwise, let us give a passing notice to the unsuccessful, which are, probably, equally instructive, on our present subject. Facts are truly said to be stubborn things. Out of a class of foremost men, who carried all the distinctions at their University, in their day, many have died prematurely in a hard struggle for existence, three have become lunatics, two have committed suicide, others have waited long under the heart-sickness of deferred hope, and have ultimately lapsed into recklessness, folly, and intemperance ; others, again, after a longer or shorter trial, have left the Profession in disgust, some of them rising to honour and distinction in another walk. These are a few of our army of martyrs, the victims in a great measure to our present faulty system, who under more favourable auspices would have benefited and dignified a more extensive field of usefulness, but are thus lost to science and the public.

It will be observed by the readers of the succeeding sketch, that we have contemplated the institution of such high offices as may supersede in the struggle for their attainment all those lower influences which are

now perniciously employed to gain a meretricious popularity, by the substitution of a scientific for a monetary standard of eminence, to the aspirations of the ambitious and deserving; and by affording a fair field without favour to the varied talents and industry which may be severally possessed or exercised; so that any man's real standing in his profession may be fixed by those who are able to judge correctly, viz., his compeers and his superiors, and not, as now, by the caprice of popular favour. Whether the adoption of our plan would effect all the good required, in rendering the profession of Physic more honoured, more enlightened, and consequently more useful, may possibly be doubted by many; but of this we ourselves are assured, that whatever imperfections may attach to it, all other published schemes of proposed medical reform are unsound, meagre, and utterly impotent towards remedying the evils of our political, scientific, and social state.

In sketching our plan for the re-organization of the Profession, we will suppose—

In the 1st place, the purchase made of a sufficiently ample space of land, in or near the British Metropolis, and the erection upon it of a suitable pile of buildings, on such a scale of magnitude as to afford all the necessary Halls, Museums, Libraries, Laboratories, Board-rooms, Offices, Printing Presses, &c., &c.

2ndly, an Executive Staff.

3rdly, an ample Charter.

To this place, with its executive, we will assign the title of "ROYAL MEDICAL INSTITUTE OF GREAT BRITAIN."

Thus having provided "a local habitation and a name," we shall proceed to sketch the different powers and uses of our Institute, under the following divisions, premising, that all is, of course, to be understood merely as suggestive and elucidatory:—

THE SCIENTIFIC DEPARTMENT.

THE EDUCATIONAL DEPARTMENT.

THE PRACTICAL DEPARTMENT.

THE FINANCIAL DEPARTMENT.

THE POLITICAL AND MISCELLANEOUS DEPARTMENT.

## SCIENTIFIC DEPARTMENT.

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PRESIDENT, BOARD, OFFICERS, SECRETARIES, ETC.

COMMENCING with this division of our scheme, we first propose that all the hospitals, country and metropolitan, in the three kingdoms, are placed at once under the central government of the Institute; by which we mean merely, the regulation of the medical appointments, and the medical treatment of the patients. These hospitals are at present as inefficient as possible, towards furnishing any amount of aid to the general progress of medicine, with the exception, at least, of a few metropolitan ones, connected with the medical schools. The present appointments, obtained through influence employed amongst the subscribers to these charities who have votes, accord not with any very high ideal of scientific arrangement, nor even of common justice, and good policy: if, indeed, the appointments made in this manner, were really the best that could have been, the charities are most lucky, but our own private views have led us to a different conclusion. We

believe that this is one of the many evils which the adoption of our plan would rectify.

The question which naturally arises *in limine*, respects the practicability of the change we propose, and it really resolves itself into this: Would the present subscribers, or governors, be true and faithful to their trust? The money they have to expend is manifestly subscribed, that the sick may receive from the charity the greatest amount of relief that money will purchase; and as the board government, and the recommendation of poor persons as patients, need not be interfered with, we cannot anticipate much difficulty on this head, more especially as, under the practical adoption and adaptation of the scheme proposed, there would be no immediate necessity at first for abolishing the medical and surgical offices, it being only requisite to secure the privilege of appointing the supply on each vacancy occasioned by death or resignation. To the governors, we apprehend it could not be an object of much solicitude, whether of two or more future men, equally unknown to them, and respecting whom they had no collateral knowledge, A. or B. was to be the medical officer; we can even imagine some of the subscribers feeling a relief from the incessant canvassing on behalf of different candidates, with which they had been previously pestered. Others, acting conscientiously in the fulfilment of their trust, might also think the physician and surgeon, sent to our hospital by his superiors, would



doubtless be the best man, they, themselves not being so capable of judging as to the requisite acquirements of the candidate, or his fitness for the vacant office ; and, after due consideration, we think all would at last gladly defer to the arrangement. When, by the working of this scheme through a few years, it produced its own proper functionaries, there would be competent and responsible officers placed over the sick (all staff-appointments, with staff-pay attached to them), restricted, by rule, from any practice but that of their hospital, and required to devote their whole time and attention to it. Only by the possession of the hospitals could a sufficient amount of disease be brought under cognizance and control, and from the nearest approximation we can make to an estimate, it appears that the number of the sick thus subjected to proper management would be ultimately and constantly little short of twenty thousand.\* How then, it may be asked, are these cases to be used and brought under the notice of the general Institute ? To effect this important object we propose, *first*, that there should be a calculation of the number of patients in any given hospital, and, next, a requisite staff of medical officers appointed over it, whose duties would be twofold, undertaking the responsible

\* The dispensaries, it is very probable, would be all ultimately merged in the larger charities, and they would conveniently supply the records of a simpler class of cases, than the hospitals generally contain.



charge of the sick, and educating a class of students (at a certain stage of professional advancement) in the practice of the hospital. Let us take a small infirmary as an example, and suppose the class of students to consist of ten. At an appointed hour, they would all be required to proceed with their tutor, through the wards, and according to seniority, or any other approved arrangement, one of the class might be called upon to examine the first case. Should any important question, or questions, be omitted by him, his colleagues, and his tutor, who are supposed to be standing by, will interfere in order by their cross-examination, either to complete, or correct the history of the case. Whilst this is going on, all the class are supposed to be making notes of what passes; the next student taking up the next case, and so on in rotation, according to any plan, which experience might prove to be the best. When the whole of the patients have been visited, the class will repair to some assigned apartment, where the diagnosis, prognosis, and treatment of each case, will form the theme of a regular consultation and decision. Memoranda, of the symptoms and the mode of treatment adopted, made on the spot, amidst the rivalry and zeal of young students, and under the guidance of experienced tutors, would be as complete and as accurate as practicable. These notes, we repeat, having been thus taken, and these young notaries being, moreover, aware at the time of the important end

they are intended to promote, they could scarcely fail of being as true and accurate as a diligent observation could make them. To conduce to the practical utility of these notes, we contemplate a complete abstract form being framed, in which the insertions, pertaining to any point in the history of each case, might be inscribed with caligraphic dispatch;\* and as every minute circumstance connected with the patient's body would be valuable in a scientific view, we should include the height, colour of the hair and eyes, complexion, &c., the important knowledge of temperament, so great a modifier of diseased actions, being generally obtained in this way. The temperature of the body, the weight of the *ingesta* and *egesta*, or any other circumstances, might thus be exacted daily, by the tutor from his class; the strictest and most untiring observation being kept up and cultivated. From a comparison of the notes of the different members of

\* This habit of accurate note-taking, is probably the most valuable acquisition next to that of minute observation, which can be made by the practitioner. Without the persevering practice of it through life, no man can benefit greatly in the way of experience; thus, for example, in any case which interests highly the mind of the attendant, during its continuance, should the facts be merely trusted to memory, the impressions which those facts create, although at first vivid, will grow year by year fainter and fainter still, until they ultimately become nearly or altogether obliterated. Hence, that misused term, experience, does not imply merely the enjoyment of extensive opportunities for improvement, but the improved use of extensive opportunities.

the class under the tutor, as soon as any case had terminated, the full history of it would have to be transcribed, and after certain intervals of time when these histories had reached the required number, they would be sealed and sent to the Institute, where, when the reports of each hospital had been received, we would have them consigned each to an allotted office. In these offices we will suppose there are one or two hundred clerks (if necessary), paid for their transcription, according to any required classification. Over this body of paid clerks, we would place a superior grade of staff officers, whom for distinction's sake we will term Inspectors of Hospital reports—men appointed for known analytical competency, whose business it would be to educe results of all kinds, which the cases would furnish and bear out; whether, as might be supposed, the object of enquiry was to ascertain the comparative value of one kind of treatment over any other in any given disease, the special action or doses of remedies, the dependency or modifications of symptoms upon such and such causes, or any question of practical import, which might arise, and which would thus, sooner or later, obtain a wide and satisfactory solution.\* Nor

\* The strict method of induction, has never yet been applied to medical researches, chiefly because the requisite machinery, *matériel*, and observers, have all been wanting, some vague approximation has been now and then attempted, under what has been termed the *numerical method*, but this is nothing more than the taking a few

would this information be necessarily confined to the reports, simply emanating from the Hospital Tutor

gross average results on a limited scale, good as far as they go, but altogether insignificant and unimportant, with reference to the objects of a scientific progress; for a little reflection will convince any one, that *a wise arrangement of the problems, a judicious setting of the experiments, or the pertinent interrogation of Nature*, constitute more essentially the value and force of the Baconian system than mere numerical results, superficially obtained, although these results must indeed afford the demonstration of the problems, the solution of the experiments, or the answers to the interrogatories: either then we must "screw our courage to the sticking place," and deal with medical facts, as the facts of Astronomy and the other physical sciences are dealt with, or it must still continue with us pretty nearly *quot tot*, to the end of the chapter. Suppose, for instance, the first gross classification of the cases, sent to the Institute be recoveries and deaths—the next, sex—the next, age, and so on, still, proceeding not arbitrarily but naturally, to the further subdivision and classification of the cases, to the last syllable of recorded fact, and with distinct offices appropriated to each, can it be doubted that a few years employed in this way would yield certainty instead of uncertainty, and proof instead of presumption? Thus, if it became necessary to satisfy public credulity, or to check the heresy of Homœopathy, the demonstration would be easy, but short of such proof which a large induction would alone yield, all is presumption. The disciples of this school presume that *similia similibus* is a grand principle; we presume, it is a fanciful and empty dogma, a delusion and a snare, — what then? Why, we can get no further. Doctors say the public are notorious for their disagreement, and here the matter ends; but suppose for the sake of argument that this system should be proved to be sound, why, since truth is the object of all scientific investigation, instead of our feeling mortified at a great defeat, we should then rejoice on the achievement of a great victory, and there could be no one, unless he were blinded by an absurd and prejudiced *esprit du corps*, but would thus feel the triumphant refutation of all past error.

and his class: points of interest, we would further suggest, might be from time to time, transmitted from the superior board at the Institute, requiring his and their attention to them, under specified circumstances, and exacting due replies, as they could be furnished. To complete our establishment there would still be needed a higher philosophical board, consisting of members having broad general attainments and talents, whose business would be the general superintendence of professional science, and whose body would comprehend a number of staff officers as Heads of Departments, and others. To perfect the scientific construction of this department, there would still further be required an ample

LABORATORY — CHIEF CHEMIST.—MUSEUM CHIEF CURATOR.—These Depositories are at present but of limited use, the facts which each preparation is capable of substantiating, should be as widely known amongst the Profession as possible, and to secure this important object *catalogues raisonnés*, with a brief note pointing out for what purpose each specimen is preserved, should always be in the possession of every member of the Faculty for reference. Thus false speculation would probably be repressed, by the powerful force of such abiding proof, restraining the errant imagination of the theorist, and confining his attention to nature and fact.

LIBRARY — CHIEF LIBRARIAN.—To all who are acquainted with the fact, that many books are written by

young physicians and surgeons as a stepping-stone to employment, which they hope to obtain by attracting the attention of the community, through their publications, and securing general notoriety and favour, it will not be at all surprising that the theories advocated by these ephemeral works, the fanciful creations of speculative minds, should be as unsound in conception as they are injurious in practice. To prevent the Profession being inundated, and society injured, by publications of this fallacious character, it is absolutely necessary that some efficient means should be adopted for the purpose of aiding the steady advance of sound doctrine and practice; and nothing seems better calculated to answer this important purpose, than a constant dissemination of the knowledge acquired by the working of the Institute, which might be greatly accelerated by keeping a steam-press in constant employment. In addition to this, we think that something like an *Index Expurgatorius* might be desirable, in order to keep the literary food of the Profession wholesome; or should such measure be thought inexpedient, the desired control would perhaps be attained by affixing the sign manual of the Institute to those published books which were adjudged sufficiently true to nature and fact. The absence of this sign would be an adequate warning to the public against medical works not authorized by the highest medical authority in the kingdom.



Foreign correspondence with the scientific men and institutions of other countries, would apparently belong to arrangements of a literary character connected with this department, and would complete its efficient working staff, sufficiently so at least for the object of our sketch; with the important exception, however, of what we may justly consider its Corinthian capital and crowning summit, viz. the office and title of "President of the Scientific Department."

The digest of this supreme officer, with the official seal attached to it, should be published as the generalizations were effected, and from time to time distributed to all the certified practitioners throughout the kingdom; and thus there would be a speedy and constant transmission of knowledge from the circumference to the centre, and back again from the centre to the circumference.

The *onward* spirit should be, in every way, fostered, and every private discovery amply rewarded. Had the discovery of the circulation of the blood been effected in our day, and the Profession been willing to reward so vast a stride in their own science, the mere subscription of a pound by each member of it, would have given to Harvey a competency for his life; the half of this sum would have conferred on Laennec a munificent token of medical obligation; even the trifling moiety of a twentieth part of a pound, would have been to the discoverer of chloroform a handsome acknowledgment of merit; but at

the present, we quietly use and are benefited by these fruits of active genius to a far greater extent than our paltry acknowledgments suppose, while we return the inventors neither gratitude, pay, nor honour.

There is, at present, no *record* of the simplest elementary truths, and consequently they are continually neglected, forgotten, and lost. The elementary truths of all the preliminary sciences are of easy access in the preliminary books on these subjects, and the demonstration of them, as in anatomy, is proportionally as accessible as their statement; but in general Medicine, even where first principles are stated or referred to, it is not so—they must be received dogmatically, since they are neither intuitive, nor substantiated; hence their reception is as problematical as if they were mere speculative opinions, and the simple deductions from them are consequently as loose and unsettled as they well can be; so that few, if challenged, are able to give a reason for the principles they avow. If we take, for example, the simple truth that marsh-miasmata cause ague, we have lived to see even this called in question, in a respectable journal, but can any practitioner of ordinary intelligence doubt the fact? He may not perhaps at present; he will feel, naturally enough, reluctant, to give up one of the simplest truths he has imbibed; but let things go on in the way they have hitherto done, and in a few years, if there be not any authentic record to which he can readily refer, detailing the instances by which the

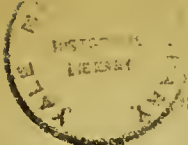


fact is fully established, his faith in it may be gradually shaken, and he may eventually be led to disbelieve what he now regards as indubitably true. Such, at least, would probably be the case with the great majority of practitioners, whose lives are spent in action and not in study, and still more so in regard to other facts less palpably liable to be substantiated. This is one of the common causes of that unsettledness of opinion and practice which ultimately leads many to adopt the common course of professional routine, in utter hopelessness, or absolute scepticism, of discovering any true principles of Medical Science. Twenty years improved by a more rigid method would probably give us concise, clear, and sound *Principia Medica* which beginning with the simplest forms of morbid action, and proceeding naturally to the more complex, would when properly arranged in a collected form, become a safe text-book for the student, a safe guide for the practitioner, and the *Ægis* of the science. Then should the empirics of the day challenge our facts, or our doctrines, we might at once refute their libellous charges by a proud and confident reference to this established Code of the Profession; but now, what can we do effectually to rebut the impudent calumny, when we are told that all our treatment is wrong, that all our remedies are poisons, and that we are in reality nothing better than legalized anthropophagi.\* We must

\* *Vide* Hydropathic and Homœopathic fulminations, *passim*.

either silently submit to the affront in contemptuous pity, or vainly express our indignation, for we have hitherto no authority, generally acknowledged by the Faculty, to which we can appeal, in support of the truth of our principles or the correctness of our practice. Hence the public, not aware of the withering proof that might be brought forward, of the utter fallacy of such unfounded pretences as are now so often made, view the matter as merely a difference of opinion betwixt one man and another, and being unable to decide which of the systems advocated by the adverse parties is right, they "first endure, then pity, then embrace," the wrong.

The medical action of remedies on the body will probably furnish the field of discovery in which, during the next century, more laurels will be won than in any other. But we must not continue to accept all our therapeutic law from the dictation of any body of men, however competent each member of that body may be. No! we must appeal from any junta, however respectable individually or collectively, to the observatories we have supposed established, and be content to learn and to receive the truth, on this great and all-important branch of our science, from the case-book, which will not only yield us the truth, but at the same time furnish the media of proof by which the truth is established. The effect of every known agent in modifying the actions of living bodies, will probably be allowed to be special



and peculiar. There are differences in the effects of the nearest allied substances, under the same bodily conditions. We have known one bitter infusion, substituted for another, make up for the difference betwixt failure and success in the treatment; and the effect of any one, or of all, must certainly ever be relative, and not absolute. The general terms commonly received, under which our remedies are classed as Tonics, Expectorants, &c., presents a striking instance of loose and indefinite phraseology. Take any one class, tonics for instance, and let any competent person say, whether the ends of a precise medication are likely to be promoted by grouping under one general term, all the different substances which produce their tonic effect so directly in some, so indirectly in others, and so variously in all. That they all do, under greatly varied conditions of body, produce tone, is granted, but under such a loose system, even the lancet might, in some instances, be classed as a tonic. Hence the necessity of marking with greater precision the morbid conditions under which each therapeutic agent produces any particular effect. Squill is noted down as an expectorant, and this dictum is received by a great proportion of practitioners in a strictly absolute and literal sense; so that, in whatever cough the expectoration is scanty or difficult, squill is of course prescribed. Another and smaller section of practitioners, rather more judicious, limit its use to certain forms of disease,

perhaps of a bronchitic character; but it is only a few who learn, from observation and reflection, that squill is only appropriate to certain morbid conditions, or stages (at present but ill-defined) of the pulmonary mucous surface — conditions that are recognised, more or less accurately, according to the tact and intelligence of the observer. In the doses of medicines, too, there remains a wide field for improvement; since there are yet no regulations for the times of repeating many important agents, which, at the commencement of acute diseases, are required to be given at shorter intervals than the authorized doses would warrant. We could enlarge at great length on this subject, if it were consistent with our present object, as we think it more decidedly requires an elaborate system of investigation than any other. Pathology has made greater advances during the last half century than Therapeutics; and, if we mistake not, there is a growing feeling that our expedients are too few, towards arresting those forms of disease of which pathology has given us the best and clearest elucidation. It is highly probable that, in the ample domain of Nature, there are medical riches of vast extent and power, as yet wholly unknown to us, which open a wide field for discovery; but even of the properties and uses of our present remedial agents, how much have we yet to learn! Let us reflect for a moment on some of those which act upon the Nervous System, and, through it, upon other structures. Is

the known peculiar action of them at all developed to the extent which their importance demands? *Belladonna*, *aconite*, *stramonium*, *cannabis*, &c., &c., what a mysterious specialty in their individual operations! and this very diversity and multiplicity of action proves, we think, what valuable agents they may become, when a closer and better system of investigation shall unfold their specific virtues. For new remedies, we are, at present, mainly indebted to the fortuitous observations of our military brethren amongst those savage and uncivilized tribes, near whose haunts or habitations they may chance to be placed; a circumstance which strongly suggests the propriety of a properly appointed Scientific Commission, to be sent out for the express purpose of examining, with a view to the increase of our remedial resources, the vegetable exuberance of South America, India, or the large islands of the Pacific.

Although we think arrangements for the prosecution of scientific progress, of higher importance than any other connected with the great subject of Medical Reform, we are willing to admit that knowledge has increased, is increasing, and will continue to increase, even under, and in spite of our present narrow and imperfect system: and although we admit that we have able and indefatigable pioneers, in almost every branch of medical investigation, are these gratifying facts to stop, or to encourage, as they ought, further progress in extending the bounds of our utility, and

increasing the resources of Medical Art? The system of which we have given so hasty and imperfect a sketch, is not intended to supersede our present resources, but to enlarge them; not to damp the ardour, or stifle the ambition of our present talented leaders, but to encourage and assist them by all such additional aid and efficient support, as we think some scheme, like the above, is calculated to afford.

## EDUCATIONAL DEPARTMENT.

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PRESIDENT, BOARD OFFICES, SECRETARIES, ETC. ETC.

To the divine and the lawyer there will ever be a necessity for a considerable amount of classical proficiency: *words, words*, are the staple of their respective professions, but in Medicine, as all ancient books on Physic, prior to the discovery of the circulation of the blood, are comparatively valueless; we hold that a lower amount of classical acquirement, yet sufficient for etymological purposes, is all that is essentially necessary. There has always appeared to our mind a considerable fallacy in the expression "a learned physician," understood as it generally is, to imply profound research into ancient authors. If the science and practice of Medicine had been perfected in some remote and bygone age, and having been subsequently lost, had to be recovered, by assiduous literary labour, from hints, quotations, and references, scattered in various languages, through books of the nearest accessible periods, subsequent to its obscurity, then might the title "a learned physician," in its present



import, be worthy of regard, and therefore a proper object of ambition ; but physic, as a *science*, being even yet in its infancy, the only book which can yield results really worth the labour of acquiring, is still the Book of Nature and its pregnant pages, the dissecting room, the laboratory, and the hospital, or indeed more widely still—every region of the earth, where men live and die. What would be thought, in our day, of the epithet *learned* as applied to a chemist? “A learned chemist!” Would it not at once strike every one possessed of sufficient information and intelligence to form an opinion on the subject as grossly misapplied?—and why? Simply because the science of Chemistry is beyond all question a modern science, and its facts, and the principles founded on them, are easily accessible through one or two modern languages and modern books; but the idea of searching for medical diamond dust amongst the cobwebs of the ancient classical writers, is nearly as absurd in medicine as to search for chemical knowledge there, would be utterly ridiculous and preposterous in chemistry. Davy, Liebig, Faraday, and the whole galaxy of chemical stars did not so learn and illustrate their art, and Medicine halting far behind, “*haud passibus æquis*,” will never overtake her more advanced sister if her pioneers, instead of pressing onward to the “*fontes sacros*” of Hygeia, and searching for the precious secrets concealed in the innermost shrine (“*adytis penetralibus*”) of the Temple of Nature, loiter idly in the pleasant

paths of classical literature, from which all the flowers they may cull and wear as ostentatious garlands will be, so far as their profession is concerned, but vain and useless ornaments, which the true disciples of Hippocrates will justly characterize as literary foppery.\*

\* These remarks are the suggestions of the recent enactments of one of our most influential chartered bodies, which almost seem to imply its distrust in any purely professional claims to public estimation, and therefore must have the effect of diverting the mind of the student in future from the more legitimate pursuits of professional excellence. Acting on this spirit, it is probable that none of the great painters, architects, engineers, and men of science would be admitted to its Pantheon, unless, indeed, they had evinced that amount of classical acquirement which the regulations alluded to prescribe. Now for these acquirements to be really claims to distinction, they must exceed in amount the average of what is obtained at our two leading Universities, whose curricula exact an exclusive attention to them up to twenty-one years of age; and if it be considered what a discursive range of study in the Natural Sciences is essentially necessary to the medical practitioner, surely these must be a full and complete set-off against an equivalent amount, at that age, of mere scholastic learning. But as there exists so great a prejudice in favour of high classical attainments being requisite to complete the ideal standard of the medical character, we will suppose a previous degree in Arts required of every medical student, and at once we become fixed in the dilemma, that on the one hand, if such a subsequent practical training as we have marked be gone through, it would carry every licentiate on to near thirty *atat* before he could obtain a licence to practice, and every doctor on to thirty-five *atat*, which would be equivalent to a decimation of the whole body, as few would then select medicine as their future calling; or, on the other hand, if the graduate's subsequent medical studies were curtailed, he would be palmed upon the public as a capable man, whilst in fact he would have still to acquire the details of his profession in his daily practice. Therefore it appears manifest, that whatever amount of scholastic knowledge be insisted upon, such knowledge should be

We mean not by this language to speak in disparagement of the Greek and Roman classics, whose literary value none can more highly appreciate; but, as in our opinion, the true dignity and public worth of a medical man arise not from classical attainments or literary refinement, but from high professional acquirements and public services, we say therefore, that instead of emulating or coveting the proper renown of the scholar, he should make it his greatest aim to deserve the gratitude of his fellow-creatures, by relieving them from suffering or rescuing them from death, esteeming one successful achievement of this kind, as a greater triumph than that of a Waterloo, and the grateful tears and affectionate esteem of a single patient, as of more value than the crown of the victor, and the loud applause of the spectators, at the Olympic games. Let our ambition, then, aim at being *skilful* physicians, rather than *learned* ones. These views, we think, should regulate

left for acquirement during the intervals of strictly professional study, and no separate and previous graduation in arts should be required. The young blood, energy, and enthusiasm of the students would then be directed into their legitimate channel. And there can be no question, that if either scholastic or professional knowledge must be subordinate, the former should be sacrificed to the latter; for although a high classical training might render its subject a more polished member of the drawing-room circle, it would be sadly out of place in the bed-room, where some poor sufferer might reasonably enough exclaim in the spirit of Anstey,

“No doubt you are all of you great *Eruditions*,  
But at present my bowels have need of Physicians.”

our professional acquirements ; but we would, on no account, either recommend or sanction such illiberal restrictions as would forbid, or even discourage, the acquisition of any higher degree of literary excellence which the tastes and opportunities of medical students might lead them to desire, and to attain. The modern languages, however, and the mathematics are unquestionably of more vital importance to the Medical Profession, as the media of future acquisitions in the Natural Sciences and in foreign medical literature, and also as disciplining the minds of medical men to a more rigid and exact ratiocination than is now generally pursued amongst them.

We propose, however, that all intended candidates for the Medical Profession, should undergo, at the age of seventeen, *a first thorough inceptive examination*, on all the subjects of ordinary scholastic training, and (since our Faculty has been justly censured for holding too material a faith) in Paley's Natural Theology. As the results of this examination, the candidates would form three classes :—

- 1st. Those who passed it with honours ;
- 2nd. Those who passed it without honours ;
- 3rd. Those who did not pass it. (Rejected A.)

The first class would, according to the plan we propose, be enrolled as Under-Graduates, with a formal diploma of admission into the Profession, their insurance, registration, and induction to a section of students who are passing what we shall term their

College life, with their assignment to an introductory school, where they would be required to pass three winters and three summers. The course of study extending through the whole of three winters, should embrace assiduous dissection of the human body, with anatomical demonstrations and private examination, as well as lectures on chemistry and chemical manipulations in a laboratory. In the three summers, there should be lectures, with demonstrations, on Natural History, Natural Philosophy, Botany, and Pharmacy.

On the completion of this curriculum, the members of the class would be each twenty years of age, and at this period we would fix our *second examination*, extending to all the subjects which have engaged their studies during the three previous years. This examination would give,

- 1st. Those who passed it with honours.
- 2nd. Those who passed it without honours.
- 3rd. Those who did not pass it. (Rejected B.)

The first and second of these, that is all who pass, will, according to the gradation of rank in our system, be created by diploma, Bachelors in Physic; but let the first class receive, in addition, as due to their superior merit, prizes, recorded in the diploma itself, or in some other mode.

The class would then advance into what we may call "Hospital life."

In our remarks on the Scientific Department, we made it the basis of our plan, that all the care of all the sick in every hospital should devolve upon the head authorities of the profession; and it will be unnecessary here to repeat what we have before prescribed for the constant occupation of the student during five years, in his continual attendance in the wards of the hospitals, viz., his taking accurate notes of the history and treatment of every case, as also compounding the medicines, cupping, bleeding, dressing, &c., &c. But we may here observe that, notwithstanding these employments, sufficient leisure would still be left, after the discharge of the hospital duties, to enable the student to extend his acquaintance with other branches of knowledge connected with his studies; and it is, therefore, probable, that advantage would, in most cases, still be taken of all accessible lectures, dissections, &c., which might assist his progress; especially as the requirements of the next examination would furnish an urgent motive to a continued diligence in those studies. For the sake of affording the varied opportunities of acquiring knowledge, which different localities might afford, it would perhaps be found expedient that the student should pass from one hospital to another during the five years, either on petition, or by fixed arrangement, so that the hospitals, which yielded a greater proportion of the great surgical operations during the year, or those places which afforded greater opportunity for



obstetrical study, might become the resort of all in due succession.

When these five years of hospital-life were ended, the student would then be twenty-five *etat*, at which age we should fix *our third public examination*, made as effective as possible, embracing perhaps synthetical and analytical anatomy, with operations on the subject, diagnosis of cases, analysis of urine, &c. &c.

This examination would give—

1st. Those who passed it with honours.

2nd. Those who passed it without honours.

3rd. Those who did not pass it. (Rejected C.)

On the two first the same degrees would be conferred, viz., the degree of Licentiate; and the possession of this degree would enable the graduate to practise all branches of his profession in any part of the realm; but to those who took honours in this examination, we should concede the *exclusive* privilege of proceeding by due course of study, to fit themselves for passing the next final and highest examination. It might, perhaps, be inexpedient to exercise any further control over the studies of the Licentiate, since the knowledge of the required tests, which he must undergo, would itself point out those subjects with which, if he were not already thoroughly acquainted, he would feel it necessary to review and complete his knowledge. The period intervening between the third and final examination, might form a convenient



opportunity for a residence at one or more of the Continental Universities; at least to those whose pecuniary resources were sufficient to enable them to procure the advantages of such an extended field of study and observation.

We should fix our *fourth and final examination* five years subsequent to the taking of the degree of Licentiate. Our student would then be 30 *etate*; and for the superior character of this class of graduates, to be duly sustained in after life, it would be desirable to render the examination such in kind and extent, as would fully warrant, to those who passed it, the higher rank and credit due to a more extended course of study, and more liberal acquirements.

This examination would yield, like the others preceding it:—

- 1st. Those who passed it with honours;
- 2nd. Those who passed it without honours;
- 3rd. Those who did not pass. (Rejected D.)

On all who passed, the degree of Doctor should be conferred, giving them the exclusive consultation practice of the kingdom, extending to all kinds of cases, whether surgical, medical, obstetrical, medico-legal, &c., &c.

To the honorati of this examination, we should advocate the concession of the primary staff appointments, professorships, commissions, &c. as prizes.

We must now for the full elucidation of our plan, revert to the first inceptive scholastic examination,

and carry forward that second class who passed this examination, but without honours. For this class we should require three years study, and lectures on Chemistry, Pharmacy, Botany, exclusive of one year of constant employment, under tuition, in the actual compounding of medicines. The students, then 21 *at*at, would be subject to an examination on all the prescribed subjects of their study, with an especial scrutiny as to their possessing a ready ability for reading, translating and compounding prescriptions.

This examination would yield only two classes:—

1st. Those who pass it;

2nd. Those who do not pass it: (Rejected E.)

of whom the former only, would receive the diploma of Apothecary, with the exclusive privilege of compounding and vending all the medicines in the kingdom.

We have now only to recur to the rejected of the different examinations:—

The rejected A would be subject to either a remand or final rejection; the rejected B would be subject to either a remand or appointment; the rejected C would be subject to either a remand or appointment; the rejected D would be subject to a remand or appointment; the rejected E would be subject to either a remand or appointment.

It is difficult, in developing plans of this kind, to avoid either the repetition of a preceding, or the anti-

cipation of a subsequent part of the general scheme; it is here, however, necessary to remind the reader, that under the Scientific department paid clerks were alluded to. Now it will be at once obvious that these officials must be in many instances, men who possess at least some technical knowledge of the subject on which they have to write, and that therefore from the rejected of all classes, clerks, secretaries, &c., might be conveniently selected, according to the amount of professional knowledge possessed on the one hand, and required on the other.

Independently of these offices, we think that a class of men would be useful (in any more perfect reconstruction of the profession) who would carry out a more minute division of labour, which would be for the benefit of all. Many members of the faculty, in full practice, have not really time for a minute and complete examination of every chest which requires it; it would, therefore, supply a great desideratum to numbers, if there existed a fully competent professional *stethoscopist*, who would devote his time principally or wholly to these important explorations. Thus on a large sheet of common paper, containing two lithographical views of the chest, the one a front aspect, the other a back one, with the clavicles, scapulæ, and ribs faintly shaded, it would be easy for the stethoscopist to inscribe on different parts of the drawing such sounds as were found to exist in the corresponding parts of the living subject;

so that on the visit of the practitioner, a single inspection would, at once, direct his attention to the regions supposed to be affected, and lead him to verify by his own ear, the sounds described by the stethoscopist, or to detect the fallacy of his observations. A *necrotomist*, who devoted his time to the dissection of dead bodies, would be a very useful assistant to the regular practitioner, and his services, in *post mortem* examinations, would on many occasions be very acceptable to the public; how many most interesting cases are suffered to pass by unexamined and unrecorded from the utter impossibility of the medical attendant, with fidelity to his other engagements, giving an hour or two for the examination of the morbid tissues! Now, a person possessed of sufficient pathological competency, who devoted his time principally or exclusively to this occupation, there are few medical men, we apprehend, who would not be willing to employ, allowing him a fair remuneration for his written statement of morbid appearances; and this, again, is another department of the medical profession, which many of the rejected candidates would be competent to fill, with credit to themselves, and benefit to others.

The analysis of urine might form a third branch of practice, and be of reciprocal benefit to all parties. Minor examinations might be instituted, as tests of ability for practising these detached and isolated parts of the profession, and *licenses* issued to those who had

passed them with credit. The *oculist, dentist, aurist, and cupper, &c.*, might pass a limited examination, and receive a special diploma, if it were thought expedient.

In contrasting this our curriculum with the present irregular and frequently absurd modes of tuition, we believe there are few who will not acknowledge, without hesitation, that the system we propose would be, in every way, superior to that which at present exists. Let us just glance at one of the ordinary phases of the student's hospital life. He is, we will suppose, at one of the large metropolitan hospitals, attending lectures on the practice of physic, perhaps clinical lectures. Would not any individual of the most common intelligence perceive the propriety of his at least seeing the patients whose cases formed the subjects of the Professor's commentaries? But unless he occupied the situation of a clerk, which few can obtain, and which even, when obtained, can be held only for a short period—we will defy him to see them (unless, indeed, it were the tips of their noses), so many students, after having scarcely obtained a glance at the first patient, are crowding, elbowing, jostling each other, in their vain attempts to get to the bed of the next. This tumultuous struggle for a hurried and passing glimpse of the poor sufferers, without so much as the interval of a moment for casting "one longing, lingering look behind," would indeed be a ridiculous farce, but for the train of melancholy

reflections it excites in the reflecting mind, which convert the whole scene into a tragedy:—and this, forsooth, is called “walking (the more appropriate term would have been “running”) the hospitals!”

In the hospital life as we have previously sketched it, the students would pass five years in the wards, whilst the division and spreading of them through so many distinct hospitals, would give to each division of the patients only a small number, so that all might go on quietly, deliberately, and well. At present, how many members of the medical profession enter upon its active duties, without having had more than the limited opportunities we have just alluded to! and, as a necessary consequence of this defective training, have actually to learn the details of practice in their first few years of settled life!! If we suppose our curriculum to cost the student for the eight years to the licentiateship, exclusive of his support, £1000, it would probably be rather above the expense really incurred: but were even the whole of the sum required, this necessary expenditure would, in our opinion, furnish no objection to the protracted course of study proposed, since we regard the present grade of medical students as too low; being, generally, young men of resources too limited, either for their own usefulness, or the general social *status* of the whole body. There seems, to us, a great fallacy in the prevalent notion which has probably, more or less, hitherto influenced the regulations for medical



education, that every genius is a poor man, and every poor man a genius. Men of first-rate talent are *rare aves*—sometimes found, indeed, in the humbler walks of life, but not so frequently as to justify a change in the general principles of a wise legislation to provide for their occasional appearance. The race of Mæcenas is not yet, we hope, quite extinct, and should any youth give early indications of possessing mental endowments of an unusually high order, his admission to the study of medicine would, doubtless, under the ample and liberal system we advocate, be easily obtained, or, if necessary, a particular provision might be expressly made to meet such a case. The two professions of law and divinity absorb, at present, the conventionally higher classes of young men : but grant us the working of our scheme, with its liberal course of study, and its higher prizes for ambition, and medical students will not be less numerous, but more wealthy, including amongst them, we doubt not, the sons of our higher families, some of them, at least, possessed of independent fortunes.

We must now glance at another great benefit which we think would necessarily accrue to the whole medical body, by the adoption of our system, <sup>\*</sup>namely, the complete destruction of that vast amount of jealousy and enmity arising from the ill defined titles, pretensions, and qualifications which different members of it now hold or claim in contradistinction to each other.



On our plan, every medical man would have a well-defined position, acknowledged by every other: each would know that any degree above the one held was accessible to him only through the prescribed legitimate regulations, and that without a strict compliance with them—neither talent, industry, patronage, time, nor money could obtain it.

Should it be asked, what will you do with all the established Medical Schools of the country? We answer—use them. The three years, before the Bachelor's degree was taken, would still give the whole future profession, during that long interval, to the schools, besides the voluntary and self-imposed attendance during the Hospital life of the student, as most if not all would probably still avail themselves of them whilst located where there were able teachers on the various subjects of professional knowledge. Under a complete working out of this scheme it might, in the course of time, become necessary to bring all Professorships or Lectureships, under the control of the Institute, for the obvious purposes of the appointment of the fittest teachers and the enrichment of the Educational Board, by constituting these Professorships as prizes to eminently qualified and deserving men. To the further enquiry that may probably be made, what will you do with the different degrees of the established Universities? We reply—ignore them. Should any of our graduates, indeed, take a fancy for other titles, by all means let such literary aspirants

win and wear them ; but in our Medical Institute they will not be recognised as any recommendation to the honours we have to bestow ; let there be no mistake about this, the studies prescribed and the qualifications, preparatory to the bestowment of our degrees, must be rigidly exacted, and as the possession of them would alone entitle any one to practise, few indeed, we suspect, amongst those who seek distinction in our Profession, will covet any other. With respect to Foreign degrees we shall hold the same position : there shall be no creeping into our ranks by any back-stairs *ad eundem*, and the Charter we hold will be sufficiently stringent to punish all contumacy, with respect to irregular practice. We are determined, having established the profession on a new, enlarged, and efficient basis, to be true to ourselves, and to the National character of our Institution. A perfect registration of our students, of all grades, would be one of the least benefits of such a course. All would be virtually adopted, by the Institute, as sons, over whose interests it would keep a watchful eye, and exercise a parental care ; and the feeling of relationship, thus produced, would, we think, be one great source of unanimity amongst the members of our community throughout after life. The publicly acknowledged high status of some of the poorer alumni of the Institute would also act as a strong countervailing recommendation of them to public favour and consideration,

against the undue influences of patrons or nepotism, two powerfully prevailing causes, at present, in securing the success of many a blockhead, against which we think the whole moral weight of a newly organized Profession should be brought to bear, by adhering to the strict *dentur dignioribus* principle of countenance and promotion.

For this department there would, of course, be required a general Education Board, with officers, &c., and a superior officer whom we shall designate President of the Educational Department of Medicine.

## PRACTICAL DEPARTMENT.

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PRESIDENT, BOARD OFFICES, SECRETARIES, ETC.

THE PHYSICIAN-GENERAL'S OFFICE.—The functions of this office we propose for the superintendence of the interests and conduct of the consulting order of practitioners, to keep up a general and frequent communication with them for the furtherance of medical knowledge, the preservation of good understanding and high tone in this class, in order, by this means to adjust disputes, repress errors, punish malversation, and reward discoveries and good services. For the fulfilment of these objects we will suppose that a graduate, with his Doctor's diploma, granted by the Censor's Board of the Educational Department, repairs to this office for a license to practice.

We may reasonably suppose a knowledge to be possessed, by some of the officials of this department, of those districts where the services of a consulting practitioner are required, so that, by the information and advice he would there receive, over-competition amongst the members of his own order, would be

obviated. He then obtains his license to practise, carrying out the above views, and restricting him moreover, from prescribing out of his own family, except in consultation with a Licentiate, or under a written case drawn by a Licentiate. As there could then be no opposition of interest betwixt these two classes of the profession, consultations, which are now generally resisted and avoided, would under the new order of things, become frequent. Amongst attorneys there is always the utmost readiness to take counsel's opinion, because there is no conflicting interest between these two branches of the legal profession, and we cannot see why, under an improved system, the same alacrity should not exist betwixt the two classes of medical practitioners. The Physician being restricted to consultations would then, of course, take higher fees than at present; for under the existing abnormal system (if system it can be called), the graduate, whose practice is theoretically consulting (and, no doubt, was in years gone by), is now, the active rival of the general practitioner, and has frequently a much larger practice, without the Surgeon or Apothecary than he has with him. To attain this end he is obliged to lower his fees, from consultation-fees to such as are equitable for ordinary attendance, and hence arises much of the professional jealousy, division, &c., to which we have frequently alluded. Under better regulations and the restrictions we have supposed, it would probably occur that instead of the



general practitioners feeling any dislike or manifesting any opposition to a consulting physician, petitions for the supply of such graduates, would, from time to time, emanate from different districts of the country, promoted by the resident Licentiates. We have before alluded to the present inferiority of the consulting class, compared with the decidedly higher acquirements which our curriculum would give it, constituting that acknowledged superiority over the Licentiate, to which he would cheerfully defer. Care would be taken by our board of the practical department, to prevent, betwixt all classes of medical persons, collusion of every kind, having for its object the undue advantage of any: so that under the better regulation of this new era of the profession, there would be neither recommendation of, nor opposition to, any physician by either Licentiate or Apothecary—or *vice versa* “a consummation devoutly to be wished!”

It is under the arduous responsibilities and anxieties, which arise in the attendance upon difficult and dangerous cases, that practical *points* of great moment present themselves most prominently; and it is in such cases, that consultations on the vitally important questions suggested, from day to day, by the symptoms, would, if transmitted to the Institute, furnish a most valuable addition to medical science, especially as these consultations would generally embrace a class of cases which the Hospitals would not include, and which would be duly and conjointly

certified by the Physician and Licentiate. If, again, it were necessary, or desirable to take the general sense and opinion of the consulting class, through all parts of the country, on any practical or theoretical question, or, to disseminate generally and speedily, amongst all the members of the profession, any new discovery, improvement, or suggestion, this practical board and office would furnish the requisite machinery. Probably the class of consulting men, under the new state of things, would not be so numerous as they are now in proportion to the population, or the comparative number of the Licentiates, but they would be far more valuable than at the present, as able practical advisers; and since we advocate no absurd and ridiculous distinctions betwixt Medicine and Surgery, or both and Obstetricy, we have made no such preposterous proposals in our educational course; and it is therefore to be presumed, that our highest graduate will be equally qualified to go into consultation on any case, whether medical, surgical, obstetrical, &c. Nevertheless there is no apparent reason, why a natural preference for exclusive practice should not be allowed to any member of the profession, in any one or more of the branches of it, requiring him still to be capable of *all*, but leaving his choice free, either to practise all or any one in particular.

THE LICENTiate-GENERAL'S OFFICE.—This board will include the same supervision, communion, pro-



tection, government, with details, as the former office, differing merely in the class of practitioners over which it would exercise jurisdiction. The chief innovating feature in reference to this class (which will be recognised as corresponding to the present class of general practitioners, although on the whole we think greatly superior), is the severance from it of all compounding of medicines, and their consequent obligation to charge for their attendance, operations, and prescriptions. Did it agree with the object of our present sketch, we could write a distinct volume, on the evils arising in every way, from the present system of medical men dealing in medicines; it is a fruitful source of fraud, error, and degradation. Amongst these evils, we may mention, that the practitioner himself in the great majority of cases, does not, nor indeed for want of time can he, mix his own medicines, or even supervise their composition; this important work is consequently often left to an apprentice, or to a boy; and thus to irresponsible and frequently incompetent persons is entrusted the all-important operation of carrying out the skill and knowledge of the prescriber. The pay of the practitioner is, by this system, made to depend upon the drugs he sends, which is degrading and liable to abuse. The Physician is, moreover, always at the mercy of the practitioner and his assistant, should the former choose to compound the prescriptions unfaithfully, either from ill will, the expense of the

remedies, or from a secret opposition of opinion as to the exigences of the case; or should the latter from sheer ignorance mix together the wrong drugs. Another, though a minor evil of the present system, is, that the medicines are too often put up in a dirty slovenly manner. Hence the best men amongst the present general class, wish for an alteration. Without entering into further particulars on this subject, we may state our settled conviction, the result of mature consideration, that after due examination as to his knowledge of the qualities of drugs, and the proper mode of compounding medicines, the master of an apothecary's shop duly authorized and responsible to his proper superior, would supply, completely and well, this inferior but highly important department in the practice of medicine.

THE APOTHECARY-GENERAL'S OFFICE. —The title of this board is sufficiently indicative of the class-supervision, &c. which it would be intended to exercise, including, more especially, Pharmacy in its widest range, and the inspection of all the drugs kept for compounding. The Apothecary to be restricted from all prescribing, or the sale of medicines, except from prescriptions; but to have the exclusive privilege (with the source of profit arising from it), of compounding all the medicines of the kingdom. This limitation, confining the sale of medicines exclusively to the Apothecary, would eventually cause the absorption of the present chemists and druggists into

the class of apothecaries. The druggist, properly so called, would be then left to the sale of his legitimate wares, as paints, oils, and all substances required in the arts and manufactures. By this arrangement the sale of poisons would be greatly restricted, or altogether prevented.

## FINANCIAL DEPARTMENT.

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PRESIDENT, BOARD, OFFICERS, ACTUARY, ETC.

THE functions of this board would extend to the regulations of all matters of public income and expenditure, in connexion with the Institute and profession.

We propose, as one main source of income, the establishment of an annual license fee, which would be necessary to enable any medical person to practise ; such as is at present the regulation for attorneys ; and we think that any regularly educated medical practitioner who does not at once perceive that he would be a great gainer, in every way, by the payment of this tax, exacted to secure the greater respectability, unanimity, usefulness, and income of the profession, is too hopelessly obtuse in intellect to render his opinion worthy of a moment's consideration : except, indeed, so far as it may increase the benevolent zeal of the more intelligent members of the profession to carry by their combined efforts a measure that would so effectually promote the true interests of their weaker brethren. Students' fees would form another

source of income of considerable amount. Insurance on our plan would be an imperative obligation; as we should make the insurance of all its members a *sine-quâ non*, without which no one could belong to the profession. If such insurance were arranged on the annuitant principle, and insisted upon at the first admission, there would be thus secured in the course of time from 13,000 to 20,000 policies, which comprehending so many young lives, as this arrangement involves, would render our Insurance Office a highly lucrative one. To the student, this economical arrangement would be most advantageous, as the præmia for securing an annuity during life, contingent on the loss of his necessary faculties of body or mind, and for affording at his death a slight provision for his widow and children, would, if it began at the age of seventeen, be really very small, whilst at the same time it would remove during his whole life, one great distracting care from his mind. This Insurance branch of our Institute would not only thus benefit the general body of medical practitioners, but moreover, probably supersede the narrow and half Eleemosynary schemes at present in operation, the good which they are capable of affording being, of course, very limited, and subject to many sources of imposition; and should it at length become, as under careful management there is every reason to suppose it would, generally approved by the public, it would take its proportion of non-medical lives, in a fair

competition with other offices, and thus largely add to its income. We think also that a subordinate branch of this department might embrace all those requirements which are constantly felt by the possessors of property for able and creditable trustees for its management, after the death of the present holder. This business conducted at a moderate charge, and especially if with contingent reversion of the property to the Institute, would probably be ultimately a source of great profit, as future members of the Institute, brought up under its provisions, would naturally avail themselves of such an office, more especially in those instances where the interests of widows or daughters were contemplated by the deviser. As we claim for our subject the highest place save one in the national interests, we cannot doubt but that an enlightened government would afford all the necessary aid to place its prosecution, through all future time, on a sound basis; if the fine arts engross legitimately their large share of public legislative patronage, it would be a supposition not to be entertained, that a subject of vastly higher and more vital importance could be neglected. In any general amalgamation of the different corporate bodies, under a comprehensive new arrangement, there would, probably, be some accumulated sources of income, which they at present individually hold, but which would, under the new system, become vested in the more general Institute for its special advantage.

## POLITICAL AND MISCELLANEOUS DEPARTMENT.

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### BOARD AND OFFICES.

THIS department would embrace all such matters as, from their nature, could not be included under the appropriate business of the other departments, especially Parliamentary Representation, Public Sanitary Measures, Asylums, Quackery.

Can any sound reason be given why the Profession of Physic should not be ennobled through its heads, as well as those of Law and Divinity? We think there neither is nor can be any abstract objection ; but there is a great practical one, viz., that at present there are no Heads, no high offices in the profession. But were such posts established, and filled by our most honourable members, such as the Principal of our Institute, with the five Heads of Departments, these officials would become the easy and appropriate recipients of Royal elevation, and consequently admissible to the Upper House. The Physician and Licentiate Generals, we think, ought also to rank with the parallel offices and titles in the Law, viz., the



Solicitor and Attorney General. The three great Professions thus equally constructed, would constitute a grand tripod, yielding equal support to, and deriving equal countenance from, the Throne, the common fountain of all honour. Should this, however, be regarded as too high an aspiration from our present dejected condition, there seems at least no valid objection to the concession of the franchise to every member of our Institute, for the purpose of returning other higher members of our body as representatives in the Lower House; provided sufficient care were taken that our independence, as a Scientific Class, should be neither weakened by, nor sacrificed to Ministerial interference.

## CONCLUSION.

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THAT under any system of medical management men will still die, there can be no question ; but who can presume to say, in regard to our progress in scientific medicine, “ Thus far shalt thou go, but no further ? ” Since, then, there are no known limits to our achievements, we ought to proceed in our endeavours to attain absolute success ; and although “ the last enemy ” may not yet be destroyed, human life will be further lengthened, as, indeed, it has already been ; and we claim all the future increasing benefits of a more exact system of culture, benefits which may accrue to science and the public, not merely from a wiser and better medication, but from such a development of the knowledge of morbid influences, as will cause them to be avoided, or, in short, so regarded, that we may excel more in preventing disease than in curing it ; yet there is scarcely a living function of the human body, but which we are even at present able to excite, to control, or variously to modify, by artificial means ; and that these means, judiciously employed, do daily and hourly, throughout all civilized

countries, afford the proper antagonism to morbid actions, is certain.\* Here, then, we rest our claims for a due countenance and consideration of Medicine, as one of the Natural Sciences, pleading for its future cultivation on a scale commensurate with its high objects—the relief of human suffering and the prolongation of human life.

Our subject has necessarily, from its nature, obliged us to look to the darker and less pleasing features of our community rather than on the brighter aspects it presents, since if all were well with us, Medical Reform would be a complete subject of supererogation; yet lest a hasty and erroneous conclusion should be formed from the general tenor of our remarks, that we belong to that class who pronounce all barren from Dan even to Beersheba, we must record our conviction that no other profession holds within its pale a greater proportion of high-minded, intelligent, and valuable men than our own. Amongst the many varied characters which the medical body includes, we are persuaded that by far the greater proportion

\* Is so certain, that any one who doubts or denies it, is either a fool or a fop : a fool, if he is unable to wield our resources, so as to obtain some measure of success; and, therefore, the sooner he turns Homœopathist the better for himself and his patients—a fop, if he hugs himself in stolid self-complacency, upon the vast discovery he has made of the fallacy, *post ergo propter*, but not having as yet reached the further discovery of the still greater fallacy, *post ergo non propter*, as there is frequently an affectation of superior sagacity, which clothes itself in scepticism as disgusting as it is false.

are either supine on the subject of Reform because they are ignorant of its claims, or are wilfully ignorant because the subject presents to their minds no immediate prospect of individual advantage; and although it appears expedient that as wide a concurrence as possible of agreement amongst our members, on any new system of arrangement, should be obtained, yet no advantage of an obtrusive character should be taken of this general apathy and ignorance to which we have alluded; for it is evident that any plan, dexterously promoted by its concocters, would obtain a ready yet unreflecting assent amongst the general body, of all those whose attention had not been duly exercised on the comparative merits of different plans. It therefore becomes necessary in canvassing the separate opinions of medical practitioners to present to each such a well-framed schedule of points and enquiries as will necessitate the reading at least of all such topics of importance as are comprehended in the general question. It is therefore a ground of credit which we assume, even from those who may differ most widely from our views, that by such publications as this, the true exigencies of our present position become manifest and understood, and, consequently, a solution of the problem is rendered comparatively easy. If, by any means, some scores of essays on the subject, from different authors, could be obtained, there would probably be some one or more points of view presented by each, the extrac-

tion of which would assist in the framing of the schedule before referred to, for a more general presentation. The annual license tax we have advocated, we anticipate would be generally objected too; yet this is obviously one of the points wherein a coercive policy would be legitimately exercised for the good of the many objectors themselves. To those who agree with the views we have hastily and superficially endeavoured to propound, we would recommend union and prompt action, or we shall continue patching, botching, tinkering, our present unorganized institutions. For it must be kept in mind that either a new comprehensive plan must be adopted, which will set at rest, and for ever, all the vexed questions which agitate us, or we shall find that by any temporizing, trimming adjustment, we have only reached a conclusion in which nothing is concluded. Are efficient leaders required? Create them—in every district there are some who would become, by your choice, able and faithful delegates and representatives. Having throughout your whole body agreed, after mature consideration, upon the requisite plan, let your language be, “We ask for no more, and we will be satisfied with no less.” The power is in the hand of the collective body of the profession. It is to be cemented by union of expression, and made effective by union of demand. What the united profession ordains, it can and will accomplish. Let there be no such words allowed to an idle, quiescent inertia, as

impossible, impracticable, Utopian, &c. Such terms are best shown to be utterly destitute of any argumentative force, by their three correlatives, gas, steam-progression, electric telegraph; all of which were ridiculed, as equally Utopian, impracticable, and impossible, in the days of their first conception. Should, however, the general feeling of the profession not be sufficiently in unison with our own, to lead to any practical efforts towards obtaining an ample and efficient reconstruction and amalgamation of our body, it is enough. We have done what we considered our duty, uninfluenced by any selfish motive, except that which we share in common with every true lover of his art, the wish to see the subject of his life's occupation placed under a more enlightened management, so as to be more honourable to those who practise it, and more useful to the public.

# A TABULAR VIEW OF THIS SCHEME

WILL GIVE US A

*Head*, as Supreme Officer or Principal.  
*Staff*, as Heads of Departments, Chief Officers, &c.  
*Body*, as Doctors, Licentiates, Apothecaries.  
*Students*, as Bachelors in Physic, Undergraduates, Students in Pharmacy.

## PRINCIPAL.

PRESIDENT OF DEPARTMENT.	PRESIDENT OF DEPARTMENT.	PRESIDENT OF DEPARTMENT.	PRESIDENT OF DEPARTMENT.
SCIENTIFIC. Chief Curator. Chief Chemist Librarian. Inspectors of Hospital Reports. Hospital Tutors.	EDUCATIONAL. Professors. Examiners. Registrars, &c.	PRACTICAL. Physician- General. Apothecary- General.	FINANCIAL. Actuary. Trustee. Clerks, &c.
			OF DEPARTMENT.
			MISCELLANEOUS. Scrutator Chief. Inspectors of Asylums. Secretaries.

DOCTORS.	DOCTORS.	DOCTORS.	DOCTORS.
LICENTIATES. Apothecaries.	LICENTIATES. Apothecaries.	LICENTIATES. Apothecaries.	LICENTIATES. Apothecaries.
BACHELORS. Undergraduates. STUDENTS IN PHARMACY.	BACHELORS. Undergraduates. STUDENTS IN PHARMACY.	BACHELORS. Undergraduates. STUDENTS IN PHARMACY.	BACHELORS. Undergraduates. STUDENTS IN PHARMACY.





AZYGCOS. *pseud.* **Medical Reform**; being the sketch of a Plan for a National Insitute of Medicine. London: Partridge and Oakley. 1853. *Only edition*, 8vo, pp. 77, (1 - tabular view of personel structure), later grey boards.

329/18

In this rare cursory review, the anonymous author who uses the pseudonym Agyggos, suggests no less that 'the *entire* reorganisation of the [Medical] Profession throughout the three kingdoms [England, Scotland and Ireland]... He refers to the profession of medicine as being 'degraded, neglected and comparatively stationary'. His 'Plan' includes a unification of the medical resources of the three countries under the central government of a new "National Insitute of Medicine". £140

October 2006







Accession no. 32918

Azygos, pseud.  
Author

Medical reform:  
being ...

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